

# Lumbar Cage Surgical Technigue

Bioactive Stand alone design



Utilizes the advantages of Titanium and Peek in one implant





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Redmond L | Lumbar Cage

## Introduction

Redmond<sup>®</sup> is a kind of none profile ALIF cage which composed of Titanium alloy and Polyether ether ketone (PEEK) for the anterior surgical stabilization of the lumbar spine.

The excellent results of Redmond<sup>®</sup> treatment of Titanium alloy (Ti-6Al-4V) surface render optimal porosity environment of microporosity.

According on researches, porosity as a contributing factor of bioactive treatment and enhance bone ingrowth.

The elastic modulus of Polyether ether ketone (PEEK) matches cortical bone closely, which characteristic significantly reduce the phenomenon of stress shielding, and thus promotes better bone fusion and prevent implant subsidence.

The material is biocompatible, corrosion-resistant, non-toxic under biological conditions and does not interfere with imaging procedures such as X-ray imaging, computerized tomography.

Please refer to the instructions for use and the instrument processing instructions.

# **Indications & Contraindications**

### Indications

Redmond<sup>®</sup> is used in anterior lumbar interbody fusion (ALIF) cages have been used in order to restore the patient's original disc height, aid with stabilisation of the affected segments and provide an environment that will permit solid bony fusion.

Indications outside US

- 1. Use with autogenous bone graft for DDD at 1 or 2 levels from L1 to S1.
- 2. Grade 1 spondylolisthesis or retrolisthesis at the involved levels.
- 3. Revision surgery for failed column operation or post-operative instability.
- 4. Canal stenosis or pseudarthrodesis of the lumbar spine

#### Indications US

The Redmond<sup>®</sup> ALIF Lumbar Cages are indicated for intervertebral body fusion procedures in skeletally mature patients with degenerative disc disease (DDD) of the lumbar spine at one or two contiguous levels from L2-S1. DDD is defined as discogenic pain with degeneration of the disc confirmed by history and radiographic studies. These DDD patients may also have up to Grade I spondylolisthesis or retrolisthesis at the involved level(s).

Redmond ALIF Lumbar Cages are to be used with autogenous bone graft and implanted via an open anterior approach. The Redmond ALIF Lumbar Cages are to be used with screws fixation. Patients should have at least six (6) months of non-operative treatment prior to treatment with an intervertebral cage.

#### Contraindications

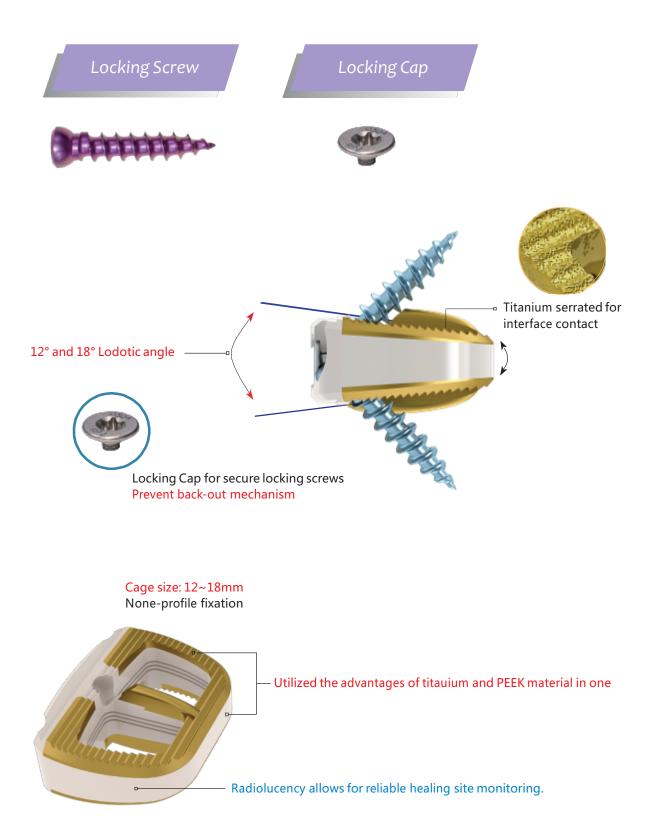
- \*\* Patients with fever or leukocytosis
- \*\* Patients with infections associated with the spine cesions (e.g. spondylodiscitis)
- \*\* Patients with a history of material allergy or who tend to react to foreign bodies
- \*\* Patients whose general medical or psychological condition is unfavorable for- or could be worsened by the procedure; careful consideration is required on the part of the treating physician/surgeon for these patients
- \*\* Patients with inadequate bone quality or quantity (e.g. severe osteoporosis, osteopenia, osteomyelitis)
- \*\* Pregnancy

Please note the instructions for use for

Redmond® implants and the instrument processing instructions.

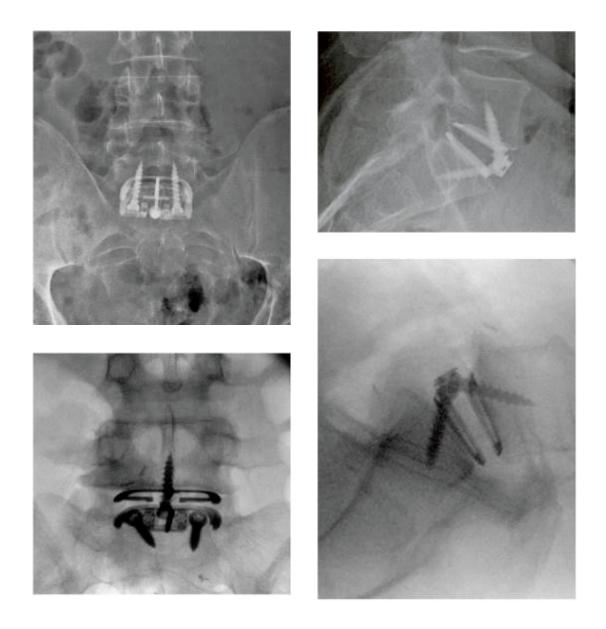
**Redmond** L Lumbar Cage

# **Design Features**





# Clinical Outcome:





# Surgical Technique

### Positioning



The patient is placed in the supine position on a radiolucent, operation table and general anesthesia is administered.

### Discectomy



Locate the intervertebral space, resect the remaining nucleus pulposus using the rongeur, the Disc Rongeur (427-7603) can be used into the disc space.

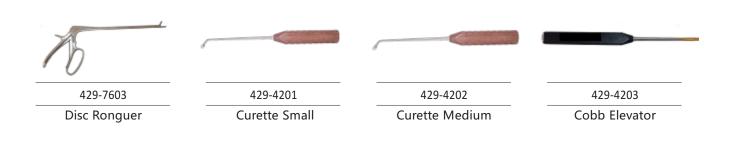
#### Caution:

Special attention has to be given to the ascending lumbar vein.

Damage to it can result in profuse bleeding. Please use it with caution.



Currette (429-4201, 429-4202, 429-4203) is moved to remove the superficial cartilaginous layers of the endplate and expose bleeding cancellous bone. Be careful not to remove too much subchondral bone for preventing the implant subsidence.



Redmond L | Lumbar Cage

### Distraction



Use Distractor (429-0901) to distract the discectomy site for restoring lordosis and neural foramen.



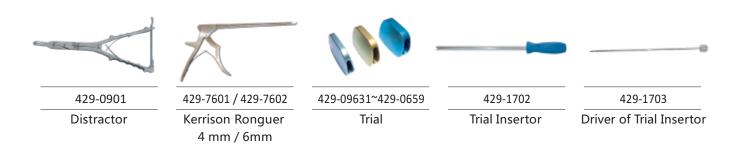
If it needs to remove vertebral osteophyte, use the Kerrison Ronguer (429-7601, 429-7602)

#### Prepare Insertion

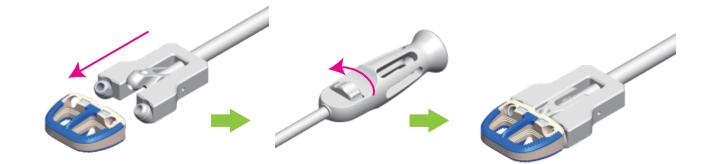


Lock the Trial (429-0631~429-0659) on the Trial Insertor(429-1702) and tighten it with the Driver of Trial Insertor (429-1703) .

Insert it into the disc space for checking size of implant. Select the implant depending on the final trial size.







Attach the cage to the Redmond lumber cage Insertor (429-1701) by screwing the handle then cage is inserted to disc space.



The implant is pre-filled with bone graft by Bone Graft Template (429-2901) and Bone Graft Impactor (218-3301).



Use the Drill Guide (429-1101) or the Redmond lumber cage Insertor with three holes to be the guide that is depending on surgeon preference. Prepare insertion site of screw by applying pressure on the handle of the Angle Awl (429-0201).



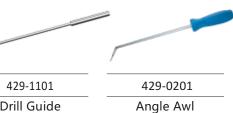
429-1701 Redmond Lumber Cage Insertor



427-2901 Bone Graft Template Bone Graft Impactor



Drill Guide





Screw Driver (429-3302) needs to connect the Handle (429-0101) proximal end.

When operate the Angle Screw Driver (429-3301) or Screw Driver (429-3302) to tighten the screws firmly, use the Guided Forcep (429-1303) to fix the angle.



The screw holder (429-1302) is used to carry the required screws to site.

After three screws are being placed, the locking cap will be the prevent back-out mechanism for securing the screws.



429-0101

Handle

429-3302 T25 Screw Driver (Straight)



429-3301 Angle Srew Driverep

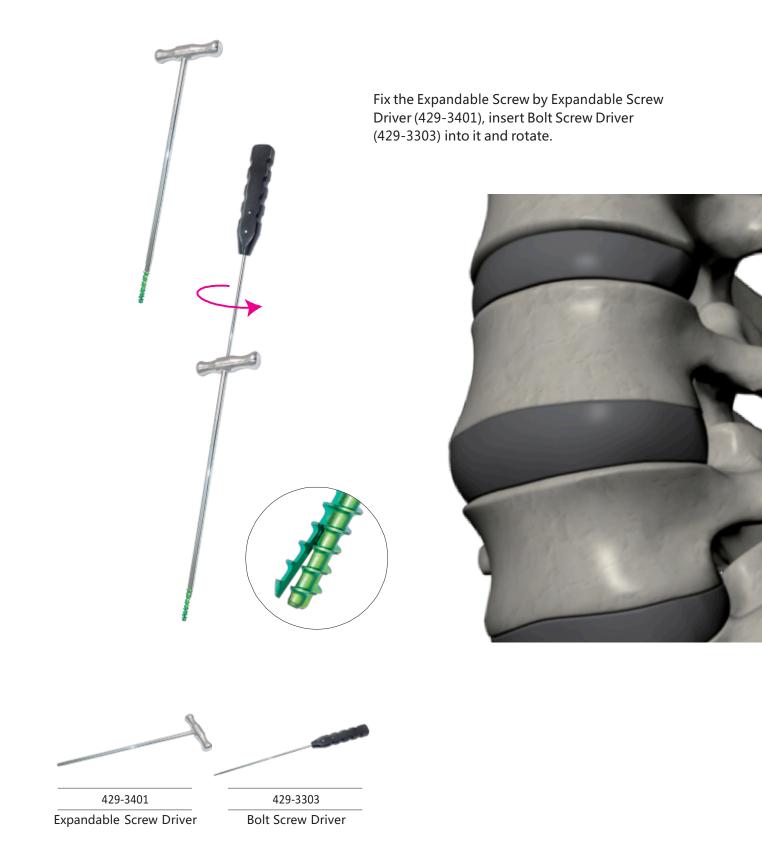


429-1303

Guided Forcep

429-1302 Screw Holder

# **Redmond** L Lumbar Cage





Driver of Trial Insertor

429-1701 Redmond lumber cage Insertor







218-3301 Bone Graft Impactor



429-1101 Drill Guide



429-3302 T25 Screw Driver (Straight)



429-3301 T25 with Angle Screw Driver



429-1302 Screw Holder 429-0201 Angle Awl



429-0101 Handle



429-1303 Guided Forcep



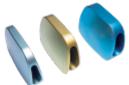
429-3401 Expandable Screw Driver



429-3303 Bolt Screw Driver



20142-043 Trial Container





20141-043 Screw Container



99900-043 Instruments container

		Trials		
Angle	H/mm	W36xL28mm	W39xL30mm	W43xL32mm
	12	429-0631	429-0641	429-0651
12°	14	429-0632	429-0642	429-0652
Τζ	16	429-0633	429-0643	429-0653
	18	429-0634	429-0644	429-0654
	12	429-0636	429-0646	429-0656
$18^{\circ}$	14	429-0637	429-0647	429-0657
10	16	429-0638	429-0648	429-0658
	18	429-0639	429-0649	429-0659

#### Sterilization :

All implants and instruments should be sterilized by steam autoclave following the instructions of the sterilizer manufacturer according to the type of sterilizer used and the method in accordance with the internal hospital guidelines to achieve the degree of sterility of  $10^{-6}$ . The suggested parameters are as follow:

- 1. Steam Wrapped Gravity Cycle at 121°C / 250°F for 30 minutes.
- 2. Steam Wrapped Gravity Cycle at 134°C / 273°F for 20 minutes.

# Implants

## Redmond Anterior Lumbar Cage

### Specifications

А	H/mm	W36xL28mm	W39xL30mm	W43xL32mm
	12	5060-1212XH	5060-2212XH	5060-3212XH
12°	14	5060-1412XH	5060-2412XH	5060-3412XH
12	16	5060-1612XH	5060-2612XH	5060-3612XH
	18	5060-1812XH	5060-2812XH	5060-3812XH
	12	5060-1218XH	5060-2218XH	5060-3218XH
18°	14	5060-1418XH	5060-2418XH	5060-3418XH
10	16	5060-1618XH	5060-2618XH	5060-3618XH
	18	5060-1818XH	5060-2818XH	5060-3818XH

## Redmond Anterior Lumbar Cage

### Locking Screw

Cat.No	Dia(mm)	L(mm)
1139-55208	5.5	20
1139-55208	5.5	25
1139-55308	5.5	30
1139-55358	5.5	35

### Expandable Screw

Cat.No	Dia(mm)	L(mm)
1147-55208	5.5	20
1147-55208	5.5	25
1147-55308	5.5	30
1147-55358	5.5	35



### Locking Cap

Cat.No	Dia(mm)	L(mm)
1140-03048	3	4





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